ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY

Pesticide Contamination Prevention Program New Agricultural Use Pesticide Evaluation Form

Company Name:		Date:		
Company Address:				
Street	City	State	Zip code	
	ables the Department	of Environmental Quality	e under A.R.S. § 3-351, an applicant shay to determine whether the new agricult	
Provide the following information (If			form.	
(a) Brand Name				
` '	on number			
			ranular, emulsified concentrate etc.)	
(d) Posticido typo	tegory	(e.g. fungicide, her	bioida inspeticida etc.)	
(d) resticide type		(e.g. rungicide, nei	bicide, insecticide etc.)	
2. List the main active ingr	edient	and Chemical A	Abstract Service (CAS) number	
3. Has the active ingredien another pesticide? Yes			aluated by ADEQ in the registration of	
4. If this is the first evaluat groundwater protection date			ion #2, has your company submitted	
distributor? Manufactu	ırer (a compa	ny that makes the active	ompany a manufacturer, formulator or ingredient) Formulator(a computor(a computor(a supplemental regist	
6. Who is the source of you (e.g. from where was it obt				_
Pesticide Registration? Ye	es No d under environmenta	If yes , please proval and use conditions that	in California by the California Departmide evidence, and documentation shows are similar to those of Arizona. **roval letters*)	
requirements for registration	on in Arizona? Yes _ gement with the techn n. If no , provide a sh	No If ical product supplier or cort explanation.	er company to meet data submittal yes , please provide evidence of a busin owner of the groundwater data must be	ess
9. If you are a distributor (supplementary registr	ant), please provide the nand EPA registration num	name of the EPA basic registrant.	
Signature		Title_		
Address:				
Phone	F,	mail address:		